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FIG. 1

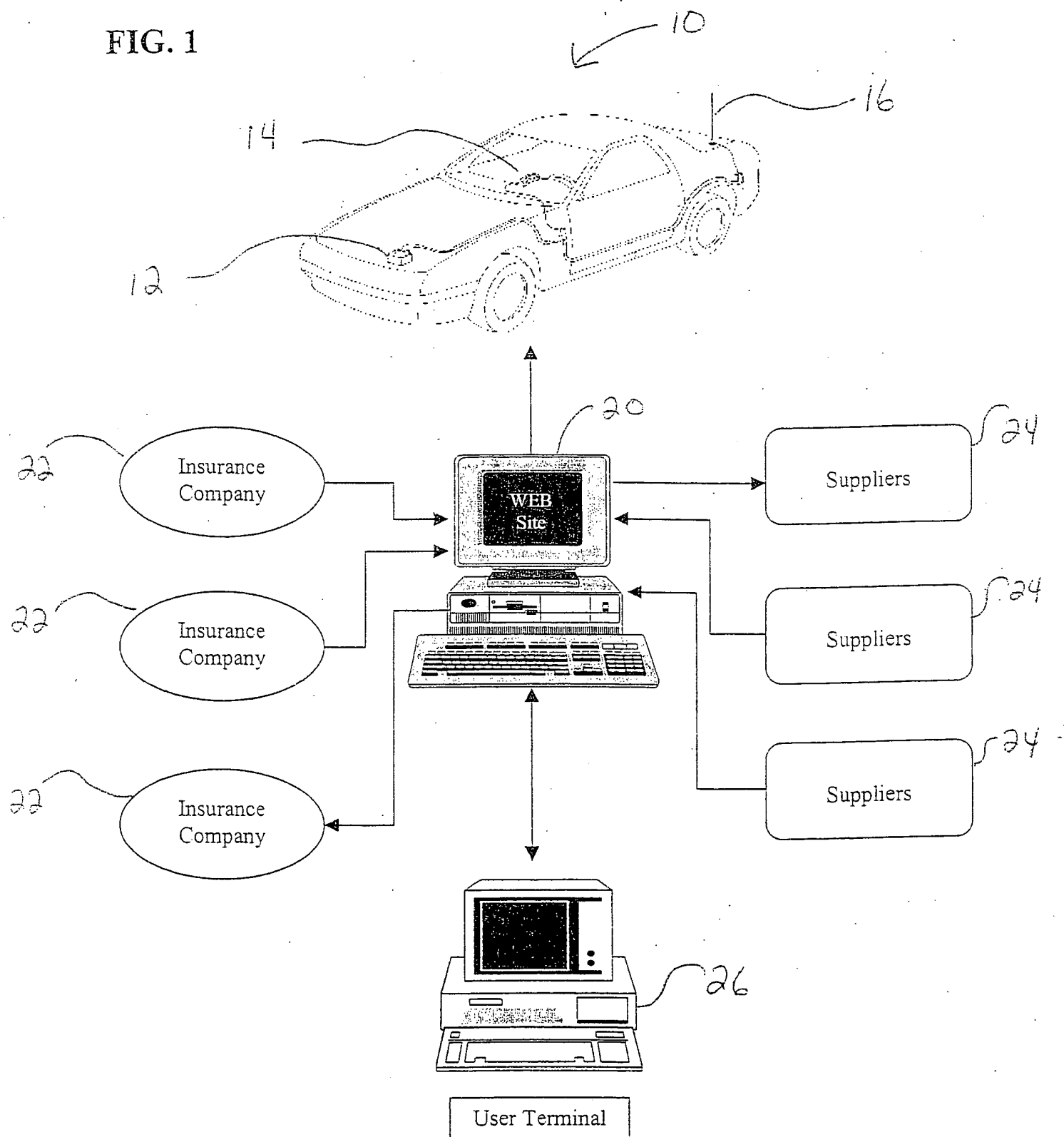


FIG. 2

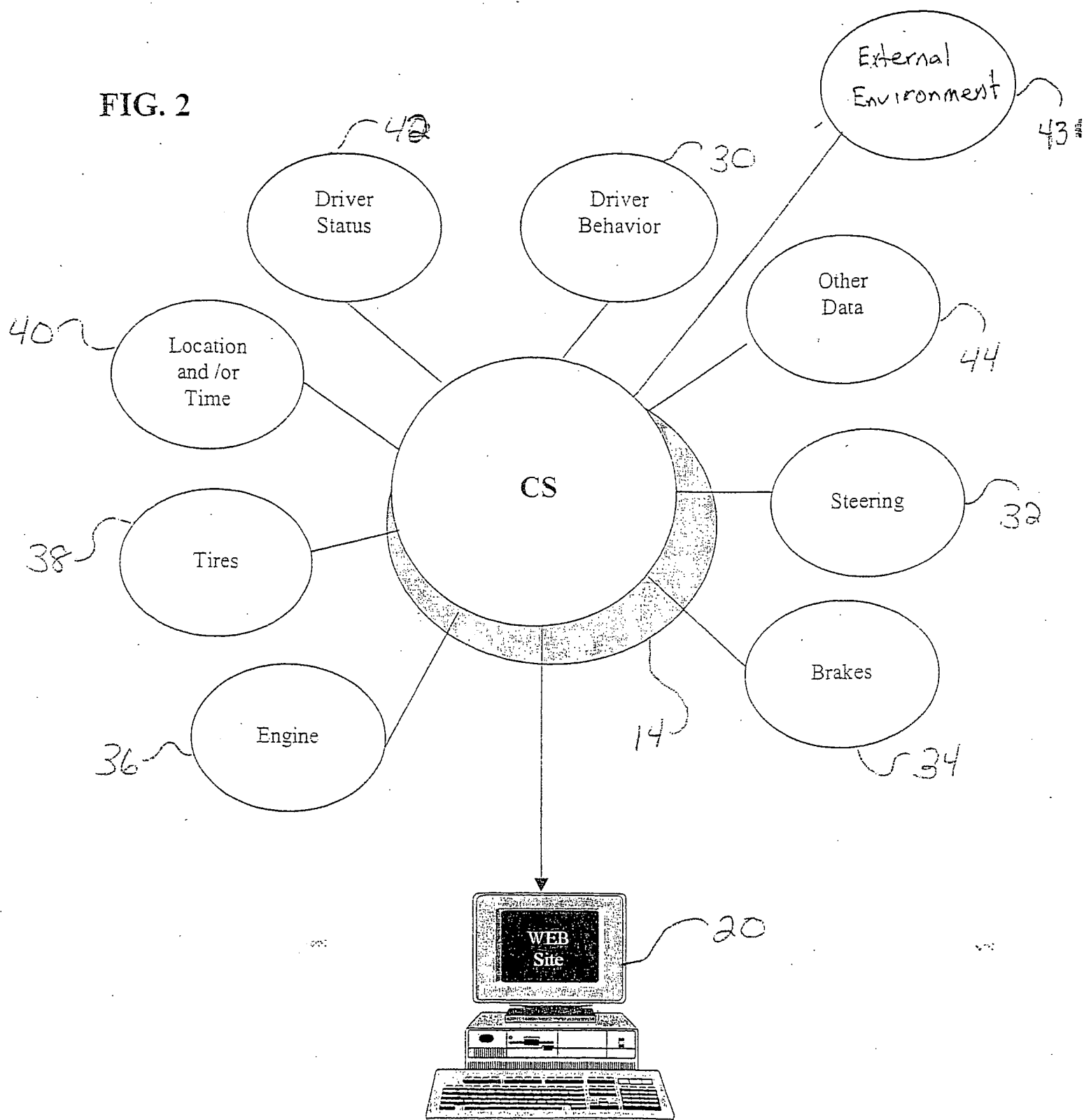


FIG. 3

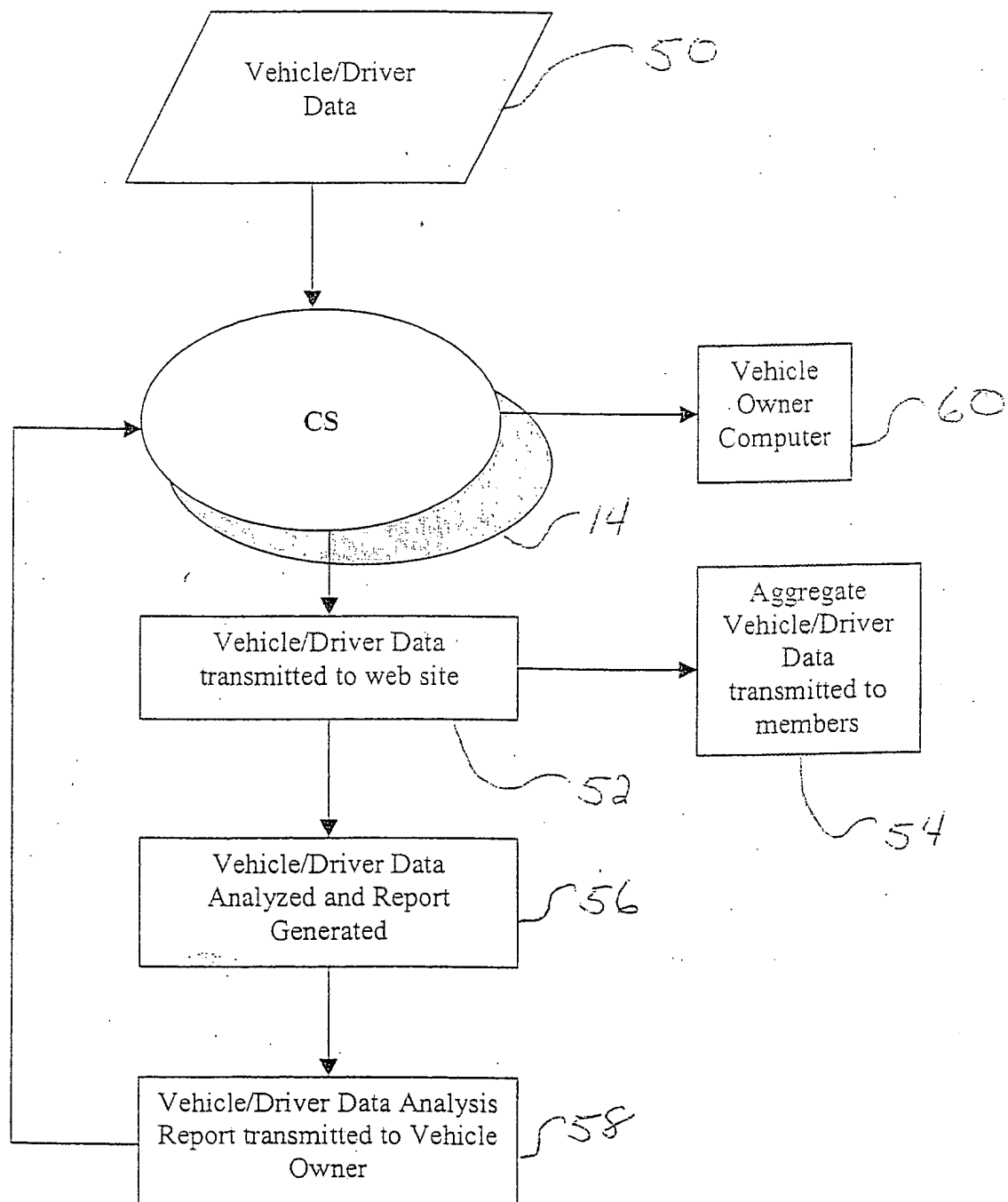
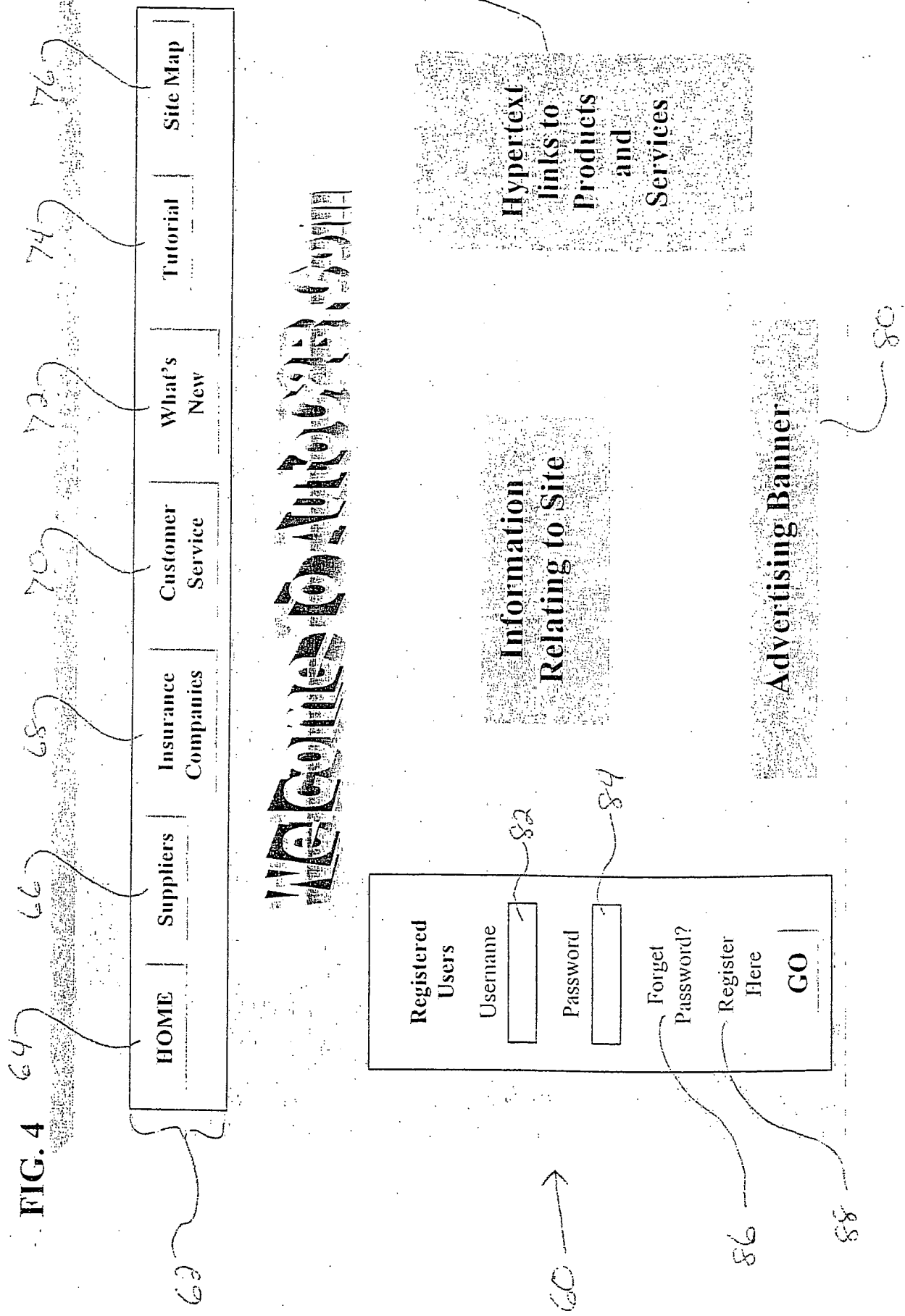


FIG. 4



Basic Information		Types of Insurance Coverage		Vehicle Information	
91	NAME:	YES	NO	Type/Model:	
92	ADDRESS	Liability	<input type="checkbox"/>	Year:	101
93	Age:	Uninsured Motorist	<input type="checkbox"/>	Safety Equip.:	102
94	Sex:	Comprehensive	<input type="checkbox"/>		103
95	Other Drivers:	Collision	<input type="checkbox"/>		104
		Liability Limits	<input type="checkbox"/>	100K	700K
		Deductibles	<input type="checkbox"/>	500K	500K
			<input type="checkbox"/>	Violations/Citations:	Any
			<input type="checkbox"/>	Any Insurance Claims filed:	105
			<input type="checkbox"/>		106

FIG. 6

